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## YOUTH VIOLENCE

Youth violence is defined as threatened or actual physical force by an individual that results in physical or psychological injury or death. In addition, the perpetrator, victim or both are under the age of 25. Youth violence in the U.S. has grown dramatically in recent years. Rates of homicide among youths 15-19 years of age are among the highest ever recorded in U.S. history for this age group. The peak age for violent crime arrests is currently 17 and youths account for nearly one of every five arrests for violent crime.

The Centers for Disease Control and Prevention (CDC) is committed to preventing youth violence through its research, program evaluation, and dissemination of information activities. It is currently compiling a sourcebook on the best practices for youth violence prevention. It is also funding projects in Birmingham, AL, Oakland, CA, and Boston, MA, targeting high school aged youth at increased risk for violence. In addition, CDC is researching risk and protective factors related to youth violence.

1. ANGER AS A PREDICTOR OF AGGRESSION AMONG INCARCERATED ADOLESCENTS. Cornell, DG. *J Consult Clin Psychol* 67(1):108-15, '99.
2. THE APPLICATION OF TRADITIONAL MARTIAL ARTS PRACTICE AND THEORY TO THE TREATMENT OF VIOLENT ADOLESCENTS. Twemlow, SW. *Adolescence* 33:505-18, Fall '98.

**N.B. A master copy of each journal article in this Bulletin is available for photocopy at each Library**

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Fax (301)594-3434

3. FACTORS ASSOCIATED WITH ABUSIVE RELATIONSHIPS AMONG MALTREATED AND NONMALTREATED YOUTH. Wolfe, DA. *Dev Psychopathol* 10:61-85, Win '98.
4. IDENTIFICATION AND ASSESSMENT OF PROBLEMATIC INTERPERSONAL SITUATIONS FOR URBAN ADOLESCENTS. Farrell, AD. *J Clin Child Psychol* 27 (3):293-305, '98.
5. JUVENILE VIOLENCE. Scott, CL. *Psychiatr Clin North Am* 22:71-83, Mar '99.
6. MULTISYSTEMIC TREATMENT OF CRIMINALITY AND VIOLENCE IN ADOLESCENTS. Borduin, CM. *J Am Acad Child Adolesc Psychiatry* 38:242-9, Mar '99.
7. RATING ELECTRONIC GAMES: VIOLENCE IS IN THE EYE OF THE BEHOLDER. Funk, JB. *Youth & Soc* 30:283-312, Mar '99.
8. THE ROLE OF THE PEDIATRICIAN IN YOUTH VIOLENCE PREVENTION IN CLINICAL PRACTICE AND AT THE COMMUNITY LEVEL. *Pediatrics* 103:173-81, Jan '99.
9. VIOLENCE PREVENTION AND YOUNG ADOLESCENTS' PARTICIPATION IN COMMUNITY YOUTH SERVICE. O'Donnell, L. *J Adolesc Health* 24:28-37, Jan '99.
10. VIOLENT BEHAVIOR IN CHILDREN AND YOUTH: PREVENTIVE INTERVENTION FROM A PSYCHIATRIC PERSPECTIVE. *J Am Acad Child Adolesc Psychiatry* 38:235-41, Mar '99.

### **CLOZAPINE TREATMENT OF SCHIZOPHRENIA**

Treatment-resistance is a health problem affecting 20-30% of people who have chronic schizophrenia. The literature indicates that clozapine, an atypical antipsychotic drug, has been found to be the only medication consistently proven to be effective for treatment-resistant schizophrenia. It benefits patients regardless of gender or ethnic group and often reduces their term of hospitalization. Research indicates that clozapine therapy may control schizophrenic symptoms to such an extent that many patients can continue their education, obtain jobs, and live independently. NIMH is currently funding research on clozapine in the treatment of schizophrenia.

11. COGNITIVE-BEHAVIORAL THERAPY AND CLOZAPINE FOR CLIENTS WITH TREATMENT-REFRACTORY SCHIZOPHRENIA. Pinto, A. *Psychiatr Serv* 50:901-4, July '99.
12. COST-EFFECTIVENESS OF CLOZAPINE IN PATIENTS WITH HIGH AND LOW LEVELS OF HOSPITAL USE. Rosenheck, R. *Arch Gen Psychiatry* 56:565-72, June '99.
13. EFFECTS OF CLOZAPINE FOR NON-TREATMENT-RESISTANT PATIENTS WITH SCHIZOPHRENIA. Galletly, CA. *Psychiatr Serv* 50:101-3, Jan '99.
14. THE EFFECTS OF CLOZAPINE ON COGNITIVE FUNCTIONING IN SCHIZOPHRENIA. McGurk, SR. *J Clin Psychiatry* 60 (Suppl 12):24-9, '99.
15. EVIDENCE OF CLOZAPINE'S EFFECTIVENESS IN SCHIZOPHRENIA: A SYSTEMATIC REVIEW AND META-ANALYSIS OF RANDOMIZED TRIALS. Wahlbeck, K. *Am J Psychiatry* 156:990-9, July '99.
16. IMPACT OF CLOZAPINE ON NEGATIVE SYMPTOMS AND ON THE DEFICIT SYNDROME IN REFRACTORY SCHIZOPHRENIA. Rosenheck, R. *Am J Psychiatry* 156:88-93, Jan '99.
17. NORMALIZATION OF INFORMATION PROCESSING DEFICITS IN SCHIZOPHRENIA WITH CLOZAPINE. Kumari, V. *Am J Psychiatry* 156:1046-51, July '99.
18. PHARMACOECONOMIC EVALUATION OF TREATMENTS FOR REFRACTORY SCHIZOPHRENIA: CLOZAPINE-RELATED STUDIES. Revicki, DA. *J Clin Psychiatry* 60 (Suppl 1):7-11, '99.
19. CLOZAPINE FOR REFRACTORY SCHIZOPHRENIA: THE ILLINOIS EXPERIENCE. Buckman, RW. *J Clin Psychiatry* 60 (Suppl 1):18-22, '99.
20. SPONTANEOUS SLOW AND FAST MEG ACTIVITY IN MALE SCHIZOPHRENICS TREATED WITH CLOZAPINE. Sperling, W. *Psychopharmacology* 142 (4):375-82, Mar '99.

### **EVIDENCE-BASED MEDICINE**

Evidence-based medicine (EBM) is described as the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients. Practicing evidence-based medicine means integrating individual clinical expertise with the best available external clinical evidence from systematic research. The literature indicates that the appeal of EBM is motivated by severe pressure on resources and by competing health care needs.

Research shows that a growing number of medical professionals believe that medicine needs to be oriented more to the existing science and knowledge base than they perceived it has been in the past. AHCPR is seeking topic nominations for the third round of evidence reports and technology assessments to be conducted by AHCPR's 12 Evidence-Based Practice Centers.

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|---|---|
| <p>21. AHCPR SEEKS NOMINATIONS OF TOPICS FOR EVIDENCE REPORTS. <i>AHCPR Res Activities</i> 226:12, May '99.</p>                                   | <p>26. EVIDENCE-BASED POLICY: RHETORIC AND REALITY. Raine, R. <i>J Health Serv Res Policy</i> 3:251-3, Oct '98.</p>   |
| <p>22. AHCPR'S EVIDENCE-BASED CENTERS: WILL THEIR FINDINGS GUIDE CLINICAL PRACTICE? Graham, J. <i>Med Health</i> 53 (Suppl): 1-4, 10 Aug '98.</p> | <p>27. HOW EVIDENCE-BASED MEDICINE WILL CHANGE THE WAY YOU PRACTICE. PANEL DISCUSSION. Roy, PJ. <i>Med Econ</i> 76:120-2, 127-8, 133. 8 Mar '99.</p>            |
| <p>23. ENABLING THE IMPLEMENTATION OF EVIDENCE BASED PRACTICE: A CONCEPTUAL FRAMEWORK. Kitson, A. <i>Qual Health Care</i> 7:149-58, Sep '98.</p>  | <p>28. HEALTH POLICY ISSUES AND APPLICATIONS FOR EVIDENCE-BASED MEDICINE AND CLINICAL PRACTICE GUIDELINES. Lohr, KN. <i>Health Policy</i> 46:1-19, Oct '98.</p> |
| <p>24. EVIDENCE-BASED INTERVENTIONS AND COMPREHENSIVE TREATMENT. Van Weel, C. <i>Lancet</i> 353:916-8, 13 Mar '99.</p>                            | <p>29. PHILOSOPHICAL LIMITS OF EVIDENCE-BASED MEDICINE. Tonelli, MR. <i>Acad Med</i> 73:1234-40, Dec '98.</p>   |
| <p>25. EVIDENCE-BASE MEDICINE: NOT AS SIMPLE AS IT SEEMS. Taylor, DK. <i>Acad Med</i> 73:1221-2, Dec '98.</p>                                     | <p>30. ROLE OF EVIDENCE-BASED MEDICINE AND CLINICAL PRACTICE GUIDELINES IN TREATMENT DECISIONS. Pearson, KC. <i>Clin Ther</i> 20:C80-5, 1998.</p>               |

### HEALTH CARE AND NATIVE AMERICANS

The Indian Health Service is the primary health provider and health advocate for Indian people. Its goals and objectives include the provision of comprehensive health services delivery with maximum tribal involvement in managing programs. The literature indicates that cultural sensitivity, preventive services, nutrition, and access to care is important in the delivery of services to this population. Within these broad categories are special initiatives which focus on injury

control, alcoholism, diabetes, and mental health. Research suggests that preventive measures involving environment, education, and outreach activities should be integrated into treatment/therapy to provide more comprehensive care.

31. CORRELATES OF PHYSICAL AND EMOTIONAL HEALTH AMONG NATIVE AMERICAN ADOLESCENTS. Jan-Richard, C. *J Adolesc Health* 24:38-44, Jan '99.
32. FAMILY DYSFUNCTION AND NATIVE AMERICAN WOMEN WHO DO NOT SEEK PRENATAL CARE. Tyson, H. *Arch Fam Med* 8:111-7, Mar-Apr '99.
33. THE IMPACT OF ETHNICITY, FAMILY INCOME, AND PARENTAL EDUCATION ON CHILDREN'S HEALTH AND USE OF HEALTH SERVICES. Flores, G. *Am J Public Health* 89:1066-71, July '99.
34. INDIGENOUS PEOPLE AND THE SOCIAL WORK PROFESSION: DEFINING CULTURALLY COMPETENT SERVICES. Weaver, HN. *Soc Work* 44:217-25, May '99.
35. PEDIATRICIAN-LED COMMUNITY CHILD HEALTH-INITIATIVES: CASE SUMMARIES FROM THE EVALUATION OF THE COMMUNITY ACCESS TO CHILD HEALTH PROGRAM. Grason, H. *Pediatrics* 103 (Suppl):1394-1419, June '99.
36. PREVALENCE AND CORRELATES OF THE INSULIN RESISTANCE SYNDROME AMONG NATIVE AMERICANS. Greenlund, KJ. *Diabetes Care* 22:441-7, Mar '99.
37. PREVENTIVE HEALTH CARE AMONG RURAL AMERICAN INDIANS IN NEW MEXICO. Gilliland, FD. *Prev Med* 28:194-202, Feb '99.
38. RACIAL BIAS IN FEDERAL NUTRITION POLICY, PART I: THE PUBLIC HEALTH IMPLICATIONS OF VARIATION IN LACTASE PERSISTENCE. Bertron, P. *J Natl Med Assoc* 91:151-7, Mar '99.
39. SELF-REPORTED HEALTH STATUS AND MORTALITY IN A MULTIETHNIC US COHORT. *Am J Public Health* 149:41-6, May '99.
40. TRIBAL TURNABOUT. Garber, K. *Hosp Health Netw* 73:16,18 Apr '99.

## MAMMOGRAM SCREENING

Mammogram screening is defined as an x-ray of the breast used to detect breast changes in women who have no sign of breast cancer. It usually involves two x-rays of each breast. The literature indicates that mammogram screening detects breast cancer or a tumor that is too small for a woman or physician to feel at an early stage. Research indicates that it is recommended for women 40 years and older to get a mammogram at less once a year. Mammograms can detect 85%-90% of breast cancer. NCHS is currently collecting data on mammogram screening.

41. DOES TELEPHONE CONTACT WITH A PHYSICIAN'S OFFICE STAFF IMPROVE MAMMOGRAM SCREENING RATES? Bodiya, A. *Fam Med* 31:324-6, May '99.
42. FALSE-POSITIVE SCREENING MAMMOGRAMS: GOOD NEWS, BUT MORE TO DO. Fletcher, SW. *Ann Intern Med* 131:60-2, 6 July '99.
43. THE GRADIENT IN MAMMOGRAPHY SCREENING BEHAVIOR: A LIFESTYLE MARKER. Hagoel, L. *Soc Sci Med* 48:1281-90, May '99.
44. IMPACT OF SAME-DAY SCREENING MAMMOGRAPHY AVAILABILITY. Dolan, NC. *Arch Intern Med* 159:393-8, 22 Feb '99.
45. PATIENTS' REPORTS OF COUNSELING ON MAMMOGRAPHY SCREENING BY HEALTH-CARE PROVIDERS—NORTH CAROLINA, 1997. *MMWR* 48:356-8, 7 May '99.
46. PSYCHOLOGIC DISTRESS IN WOMEN WITH ABNORMAL FINDINGS IN MASS MAMMOGRAPHY SCREENING. Lowe, JB. *Cancer* 85:1114-8, 1 Mar '99.
47. RELATIONSHIP BETWEEN EARLIER AND LATER MAMMOGRAPHY SCREENING—CALIFORNIA MEDICARE, 1992 THROUGH 1994. Parker, JD. *West J Med* 170:25-7, Jan '99.
48. SCREENING MAMMOGRAPHY AND LATE-STAGE BREAST CANCER: A POPULATION-BASED STUDY. Wu, Y. *Prev Med* 28:572-8, June '99.
49. SCREENING MAMMOGRAPHY UNDER AGE 50. Antman, K. *JAMA* 281:1470-2, 28 Apr '99.
50. A TANGLED WEB: FACTORS LIKELY TO AFFECT THE EFFICACY OF SCREENING MAMMOGRAPHY. Baines, CJ. *J Natl Cancer Inst* 91:833-8, 19 May '99.

## REINVENTING GOVERNMENT

Since 1990, the management staff of the Parklawn Health Library has selected 10 journal articles per month on innovative management techniques to appear in each Bulletin. First entitled "Total Quality Management," this recurring bibliography was renamed "Reinventing Government" to reflect and support the Administration's efforts to create a government that works better and costs less.

51. CRISIS, CULTURE, AND CHARISMA: THE NEW LEADER'S WORK IN PUBLIC ORGANIZATIONS. Valle, M. *Public Personnel Manage* 28:245-57, Sum '99.
52. DEVISING ADMINISTRATIVE REFORM THAT WORKS: THE EXAMPLE OF THE REINVENTION LAB PROGRAM. Thompson, JR. *Public Admin Rev* 59:283-92, July-Aug '99.
53. EFFECTIVE COMMUNICATION IN THE PERFORMANCE APPRAISAL INTERVIEW: FACE-TO- FACE COMMUNICATION FOR PUBLIC MANAGERS IN THE CULTURALLY DIVERSE WORKPLACE. Kikoski, JF. *Public Personnel Manage* 28:301-22, Sum '99.
54. EXPERIMENTS IN EXCELLENCE. Thompson, JR. *Gov Executive* 31:81-6, July '99.
55. FIVE WAYS TO TURN YOUR MANAGEMENT TEAM INTO A LEADERSHIP TEAM. McIntyre, MG. *J Qual Participation* 22:40-4, July-Aug '99.
56. THE POWER OF COMPLAINTS. Harari, O. *Manage Rev* 88:31-4, July-Aug '99.
57. QS-9000 CUSTOMER SATISFACTION MONITORING ISN'T WORKING. Loomis, WR. *Qual Progress* 32:54-9, July '99.
58. REACHING HIGH LEVELS OF PERFORMANCE THROUGH TEAM SELF-EVALUATION. Rees, F. *J Qual Participation* 22:37-9, July-Aug '99.
59. STRATEGIES FOR SUCCESS. Peal, CW. *Gov Executive* 31:68-74, July '99.
60. WHAT GIFTED STRATEGIC THINKERS DO. Linkow, P. *Training & Develop* 53:34-7, July '99.

## VIOLENCE AND SUBSTANCE ABUSE

Substance abuse is frequently encountered in those receiving services for violence treatment . The literature indicates that as the severity of substance abuse increases, so does the dangerousness and frequency of violent behaviors. Statistics show that among college students, gun ownership was positively associated with binge drinking and the need to start the day with alcohol. Research indicates that the exact relationship between violence and substance abuse is difficult to determine due to factors such as family history, gender, and comorbid conditions such as conduct disorders. SAMHSA is targeting school violence by sponsoring The Safe Schools/Healthy Students Initiative. Grants totaling more than \$180 million per year will be awarded to local educational authorities and their mental health and law enforcement partners in order to promote healthy childhood development and address the problems of school violence and substance abuse.

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| <p>61. ALCOHOL ABUSE AND SUICIDAL BEHAVIOUR IN YOUNG AND MIDDLE AGED MEN: DIFFERENTIATING BETWEEN ATTEMPTED AND COMPLETED SUICIDE. Rossow, I. <i>Addiction</i> 94:119-207, Aug '99.</p> | <p>66. ISSUES IN THE PSYCHIATRIC TREATMENT OF AFRICAN AMERICANS. Baker, FM. <i>Psychiatr Serv</i> 50:362-8, Mar '99.</p>   |
| <p>62. EMPIRICAL CLUSTERS OF DSM-III PERSONALITY DISORDERS IN VIOLENT OFFENDERS. Blackburn, R. <i>J Personal Disord</i> 13:18-34, Spr '99.</p>  | <p>67. MERIT AWARD RESEARCH HELPS REVEAL LONG-TERM AND DEVELOPMENTAL IMPACT OF DRUG ABUSE. Zickler, P. <i>NIDA Notes</i> 14(1):9-11, '99.</p>                    |
| <p>63. GUNS AT COLLEGE. Miller, M. <i>J Am Coll Health</i> 48:7-12, July '99.</p>   | <p>68. MOTHERS' ALCOHOL AND OTHER DRUG PROBLEMS AND THEIR PUNITIVENESS TOWARD THEIR CHILDREN. Miller, BA. <i>J Stud Alcohol</i> 60:632-42, Sep '99.</p>          |
| <p>64. AN INCREASE IN THE NUMBER OF DEATHS IN THE UNITED STATES IN THE FIRST WEEK OF THE MONTH. Phillips, DP. <i>N Engl J Med</i> 341:93-8, 8 July '99.</p>                             | <p>69. VIOLENT SUBSTANCE ABUSERS IN DOMESTIC VIOLENCE TREATMENT. Brown, TG. <i>Violence Vict</i> 14:179-90, Sum '99.</p>   |
| <p>65. INITIATIVE TARGETS SCHOOL VIOLENCE. <i>SAMHSA News</i> 7:1-2, Sum '99.</p>   | <p>70. YOUNG WET AND WILD? ASSOCIATIONS BETWEEN ALCOHOL INTOXICATION AND VIOLENT BEHAVIOUR IN ADOLESCENCE. Rossow, I. <i>Addiction</i> 94:1017-31, July '99.</p> |



## SELECTED NEW ACQUISITIONS

To permit review of all books and reports in this list, they will not be circulated until three weeks from the date of this Bulletin. All materials are available for review on the NEW BOOKS display shelf near the Service Desk of the Library. You may reserve any book simply by completing the yellow strip form available on the display shelf.

### DRUG ABUSE

QV  
77.7  
S689 CANNABIS AND  
COGNITIVE FUNCTION-  
ING. Solowij, Nadia. New  
York, NY, Cambridge  
University Press, 1998, 290 p.

HV  
5825  
M3865 THE FIX. Massing, Michael.  
New York, NY, Simon &  
Schuster, 1998, 335 p.

BF  
531  
E49 STRONG FEELINGS:  
EMOTION, ADDICTION,  
AND HUMAN BEHAVIOR.  
Elster, Jon. Cambridge, MA,  
MIT Press, 1999, 252 p.

WU  
29  
B868

BUILDING PARTNER-  
SHIPS TO IMPROVE  
CHILDREN'S ACCESS TO  
MEDICAID ORAL  
HEALTH SERVICES:  
NATIONAL CONFERENCE  
PROCEEDINGS. Arlington,  
VA, Health Care Financing  
Administration, Health  
Resources Services  
Administration, National  
Center for Education in  
Maternal and Child Health,  
1999, 80 p.

WS  
16  
M575

IMPROVING THE  
HEALTH OF  
ADOLESCENT GIRLS:  
POLICY REPORT OF THE  
COMMONWEALTH FUND  
COMMISSION ON  
WOMEN'S HEALTH.  
Meyer, Jane E. New York,  
NY, Commonwealth Fund,  
[1999], 63 p.

### HEALTH PLANNING

W  
275AA1  
T4665 BROKEN PROMISES:  
FRAUD BY SMALL  
BUSINESS HEALTH  
INSURERS. Tillman,  
Robert. Boston, MA,  
Northeastern University  
Press, 1998, 216 p.

W  
130AA1  
Z395m THE MANAGED CARE  
BLUES AND HOW TO  
CURE THEM. Zelman,  
Walter A. Washington, DC,  
Georgetown University Press,  
1998, 224 p.

WA  
540AA1  
A553 PUBLIC HEALTH  
POLICIES AND SOCIAL  
INEQUALITY. Andrain,  
Charles F. New York, NY,  
New York University Press,  
1998, 292 p.

W  
87  
M852 MANAGED CARE  
STRATEGIES: A  
PHYSICIAN PRACTICE  
DESK REFERENCE.  
Moseley, George B.  
Gaithersburg, MD, Aspen  
Publishers, 1999, 609 p.

W  
84.1  
D7999 STRATEGIES FOR  
INTEGRATED HEALTH  
CARE: EMERGING  
PRACTICES IN  
INFORMATION  
MANAGEMENT AND  
CROSS-CONTINUUM  
CARE. Drazen, Erica. San  
Francisco, CA, Jossey-Bass  
Publishers, 1999, 240 p.

WX  
150  
K52 MANAGING CHANGE IN  
HEALTH CARE:  
INNOVATIVE SOLUTIONS  
FOR PEOPLE-BASED  
ORGANIZATIONS. Key,  
M.K. [Westchester, IL],  
HFMA, Healthcare Financial  
Management Association,  
1999, 276 p.

WZ  
80.5.W5  
W842 WOMEN AND HEALTH IN  
AMERICA: HISTORICAL  
READINGS. 2nd ed.  
Madison, WI, University of  
Wisconsin Press, 1999, 692 p.

WA  
540FA1  
C1355 THE POTENTIAL FOR  
HEALTH. Calman, Kenneth  
C. New York, NY, Oxford  
University Press, 1998, 280 p.

WA  
400  
C4215 WORKSITE HEALTH  
PROMOTION. Chenoweth,  
David H. Champaign, IL,  
Human Kinetics, 1998, 185 p.

WA  
590  
P944533 PROMOTING HEALTH IN  
MULTICULTURAL  
POPULATIONS. Thousand  
Oaks, CA, Sage Publications,  
1999, 554 p.

## MANAGEMENT

HF  
5415.5  
B388 AT YOUR SERVICE:  
CALAMITIES,  
CATASTROPHES AND  
OTHER CURIOSITIES OF  
CUSTOMER SERVICE.  
Becker, Hal B. New York,  
NY, Wiley, 1998, 258 p.

JF  
1525.O73  
T361      MANAGERS, PART OF  
THE PROBLEM?:  
CHANGING HOW THE  
PUBLIC SECTOR WORKS.  
Thomas, Camaron J.  
Westport, CT, Quorum,  
1999, 171 p.

QT  
255  
S189      ACTIVE YOUTH: IDEAS  
FOR IMPLEMENTING  
CDC PHYSICAL  
ACTIVITY PROMOTION  
GUIDELINES. Sammann,  
Patricia. Champaign, IL,  
Human Kinetics, 1998, 156 p.

HD  
58.6  
S2996      THE POWER OF NICE:  
HOW TO NEGOTIATE SO  
EVERYONE WINS.  
Shapiro, Ronald M. New  
York, NY, Wiley, 1998,  
268 p.

WT  
104  
G562      AGING: STRATEGIES FOR  
MAINTAINING GOOD  
HEALTH AND  
EXTENDING LIFE.  
Golczewski, James A.  
Jefferson, NC, McFarland &  
Co., 1998, 203 p.

HF  
5549.5.  
E43  
B7398      PREVENTING WORK-  
PLACE VIOLENCE: A  
GUIDE FOR EMPLOYERS  
AND PRACTITIONERS.  
Braverman, Mark. Thousand  
Oaks, CA, Sage Publications,  
1999, 158 p.

WB  
890  
G578      ALTERNATIVE HEALTH  
CARE: MEDICINE,  
MIRACLE, OR MIRAGE?  
Goldstein, Michael S.  
Philadelphia, PA, Temple  
University Press, 1999, 278 p.

## **MEDICAL & ALLIED SCIENCES**

WL  
354  
W436      ADHD IN ADULthood: A  
GUIDE TO CURRENT  
THEORY, DIAGNOSIS,  
AND TREATMENT. Weiss,  
Margaret. Baltimore, MD,  
Johns Hopkins University  
Press, 1999, 357 p.

WT  
155  
A47827      ALZHEIMER'S DISEASE  
SOURCEBOOK: BASIC  
CONSUMER HEALTH  
INFORMATION ABOUT  
ALZHEIMER'S DISEASE,  
RELATED DISORDERS,  
AND OTHER DEMENTIAS.  
2nd ed. Detroit MI,  
Omnigraphics, 1999, 524 p.

QV  
800  
A6327      ANTIOXIDANT STATUS,  
DIET, NUTRITION AND  
HEALTH. Boca Raton, FL,  
CRC Press, 1999, 650 p.

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|--|--|-------------------------------|--|
| <p>PHS<br/>99-1693<br/>ser.11<br/>no.243</p> | <p>BLOOD FOLATE AND<br/>VITAMIN B12: UNITED<br/>STATES, 1988-94. U.S.<br/>Department of Health and<br/>Human Services, National<br/>Center for Health Statistics,<br/>[Washington, DC, U.S.<br/>G.P.O., 1998], 78 p.</p> | <p>QV<br/>800<br/>S6683</p>   | <p>EVERY PERSON'S GUIDE<br/>TO ANTIOXIDANTS.<br/>Smythies, John R. New<br/>Brunswick, NJ, Rutgers<br/>University Press, 1998, 140 p.</p>                             |
| <p>WT<br/>39<br/>D541</p>                    | <p>CONDITIONS OF AGING.<br/>Dial, Lanyard K. Baltimore,<br/>MD, Williams &amp; Wilkins,<br/>1999, 179 p.</p>   | <p>QT<br/>29<br/>H1912</p>    | <p>HANDBOOK OF SPORTS<br/>MEDICINE: A SYMPTOM-<br/>ORIENTED APPROACH.<br/>2nd ed. Boston, MA,<br/>Butterworth-Heinemann,<br/>1999, 431 p.</p>                        |
| <p>W<br/>85.5<br/>C767</p>                   | <p>CONTEMPORARY<br/>PERSPECTIVES ON<br/>RATIONAL SUICIDE.<br/>Philadelphia, PA,<br/>Brunner/Mazel, 1999, 236 p.</p>  | <p>WT<br/>104<br/>H191278</p> | <p>HANDBOOK OF<br/>THEORIES OF AGING.<br/>New York, NY, Springer<br/>Publishing Co., 1999, 516 p.</p>  |
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## GUIDE TO LIBRARY RESOURCES

**DIGEST OF EDUCATION STATISTICS.** National Center for Education Statistics. U.S. Government Printing Office. Washington, D.C. 1998. Ref-Gen L/111/A6

This source includes a variety of fields of education statistics which are nationwide in scope and current in interest. In addition to the seven chapters listed below, there is a guide to sources which provides information on the surveys used to generate the statistics and a definitions section which explains the terms included in the surveys. The seven main chapters include:

- All Levels of Education
- Elementary and Secondary Education
- Postsecondary Education
- Federal Programs for Education and Related Activities
- Outcomes of Education
- International Comparisons of Education
- Learning Resources and Technology

**PUBLIC HUMAN SERVICES DIRECTORY.** American Public Human Services Association. Washington, D.C. 1998/99. Ref-Assn HV/89/P96

The Public Human Services Directory was previously published as the Public Welfare Directory. This book lists major public human services agencies in the United States and Canada. The main portion of this source lists human services resources by state. Here one can find information on the names, addresses and telephone numbers, information contacts, and organizational structure of each human service agency. In addition, there are appendixes which include:

- Administration of Human Service Programs
- Supplemental Security Income Program
- Interstate Compacts
- TRICARE Managed Health Care Program
- State Directors of Research, Demonstration, and Evaluation
- Key Congressional Human Service Committees
- State Human Service Agency Privatization Efforts

## PREVIOUS CURRENT TOPICS

Previous current topics can be obtained upon request

Topic	Bulletin No.	Date
Bioterrorism Childhood Asthma Chiropractic Versus Medical Education Evidence Based Medicine in Managed Care Genetics and Drug Addiction Reinventing Government Women's Mental Health	475	June 1999
Eating Disorders and Women Hormone Replacement Therapy HRSA's Agenda for Women's Health Medical Savings Accounts Reinventing Government School Violence Substance Abuse and Mood Disorders	476	July 1999
Diabetes Childhood Obesity Drugs in the Workplace Hospitalists Reinventing Government Responsible Fatherhood Selective Serotonin Reuptake Inhibitors	477	August 1999

## **LIBRARY CLIENTELE**

The Parklawn Health Library System serves the following components of the Department of Health and Human Services (HHS):

- Administration for Children and Families
- Administration on Aging
- Agency for Health Care Policy and Research
- HHS Regional Offices
- Health Resources and Services Administration
- Indian Health Service
- National Center for Health Statistics
- National Institute of Mental Health
- National Institute on Drug Abuse
- Office of the Secretary
- Office of Public Health and Science
- Program Support Center
- Substance Abuse and Mental Health Services Administration

## **LIBRARY MISSION**

The Parklawn Health Library, the NCHS Staff Research Library, and the Information Resources Center plan, develop, and administer a national research collection and innovative information programs in direct support of the Department of Health and Human Services.

## **LIBRARY COLLECTION**

The Scope of the collection includes the delivery of health care, health administration, health policy, health services research, health promotion and disease prevention, computer sciences, management sciences, medical sociology, health statistics, international health, epidemiology, public health, mental health, psychiatry and neurology, and substance abuse.

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